**Professional Disclosure Statement**

**Tiffany Kettermann, MA, MPA  
Licensed Professional Counselor,**

**Certified Drug and Alcohol Counselor I**

The Flanders House

2925 NE Flanders, Suite 3C

Portland, OR 97232

971-270-0167

Tiffany.Kettermann@gmail.com

**Philosophy and Approach:** We all have our own unique journeys in life. Hurt and pain are an inevitable part of that journey. However, I believe we are built for connection and are not meant to be alone, particularly as we face difficult times. A stable and safe relationship with a trusted counselor can be an important part of your journey, helping you to feel supported and to arrive at useful and positive solutions. It is an honor to be able to walk with you on your journey. While I believe in research-informed approaches, I most hope that you find you are met with compassion and support as we work together to discover your strengths and develop skills to grow into the person you want to be.

**Formal Education and Training:** I hold my Master’s Degree (MA) in Clinical Mental Health Counseling and a post-graduate certificate in Trauma Response Services from George Fox University. My training includes working with individuals, groups and families; lifespan development; anxiety and depression; crisis, trauma and abuse; personality disorders; neuropsychology; health psychology; substance abuse; diversity issues; diagnosis and assessment, treatments and interventions. I am a member of the American Counseling Association. To maintain my license, I am required to participate in continuing education, taking classes dealing with subjects relevant to this profession.

**Ethical Code and Intern Supervision:** As a licensee of the Oregon Board of Licensed Professional Counselors and Therapists, I abide by its Code of Ethics.

**Fees:** The standard fee is $180.00 per appointment; however, a sliding fee scale is available upon request. Fees are due and payable at the beginning of each session.

**Emergencies:** In case of emergency between scheduled appointments, please call the Multnomah County Crisis Line at (503) 988-4888. If you are unable to get through, please call 911.

**Length of Session/Cancellations:** Each session is 55 minutes. Please contact the office 24 hours in advance if you need to reschedule or cancel an appointment. Unforeseen circumstances may arise that prevent you from contacting the office 24 hours in advance. After one missed appointment, the policy is to charge for a missed appointment not cancelled at least 24 hours in advance. Excessive appointments may result in termination of therapy and referral to another therapist.

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**Your rights:** As a client of an Oregon licensee, you have the following rights:

* To expect that a licensee has met the qualifications of training and experience required by state law
* To examine public records maintained by the Board and to have the Board confirm credentials of a licensee;
* To obtain a copy of the Code of Ethics (Oregon Administrative Rules 833-100);
* To report complaints to the Board;
* To be informed of the cost of professional services before receiving the services;
* To be assured of privacy and confidentiality while receiving services as defined by rule or law, with the following exceptions: 1) Reporting suspected child abuse; 2) Reporting imminent danger to you or others; 3) Reporting information required in court proceedings or by your insurance company, or by other relevant agencies; 4) Providing information concerning licensee case consultation or supervision; and 5) Defending claims brought by you against me;
* To be free from discrimination because of age, color, culture, disability, ethnicity, national origin, gender, race, religion, sexual orientation, marital status, or socioeconomic status.

**Confidentiality:** The content of our sessions is protected by confidentiality requirements from the Oregon Board (listed above) and professional ethical guidelines. I will not disclose information about you, your records or our conversation without your express written consent except as required by law.

If you ever have any questions or concerns about confidentiality and exceptions to confidentiality, please ask me to discuss them with you. I want to make every effort to ensure that you are fully informed.

If you have questions about other aspects of this disclosure statement or our work together, please let me know. I encourage you to ask questions at any time. You may also contact the Oregon Board below:

The Oregon Board of Counselors and Therapists

3218 Pringle Rd. SE, Suite 250

Salem, OR    97302-6312.

(503) 378-5499

Email: [1pct.board@state.or.us](mailto:1pct.board@state.or.us).

Website: [www.oregon.gov/oblpct](http://www.oregon.gov/oblpct).

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Client Signature Date Therapist Signature Date